## NUMBER ONE\* FOR A REASON

Simple. Predictable. Precise.

**EverFlex**<sup>™</sup> Self-expanding Peripheral Stent with **Entrust**<sup>™</sup> Delivery System







# The #1\* Peripheral Stent

When you need to stent, trust the precision, strength, and flexibility of the the EverFlex stent.

#### **Everflex Self-expanding Peripheral Stent**

- 1. Spiral cell connection pattern enhances flexibility.
- 2. Three-wave peak design produces expansion force that resists compression and provides excellent wall apposition.
- **3.** Peak-to-peak connection nodes help to disperse force uniformly among four struts
- 4. Tantalum markers enhance visibility for easier, more precise positioning.
- 5. Flexible design improves fracture resistance and restores vessel patency.

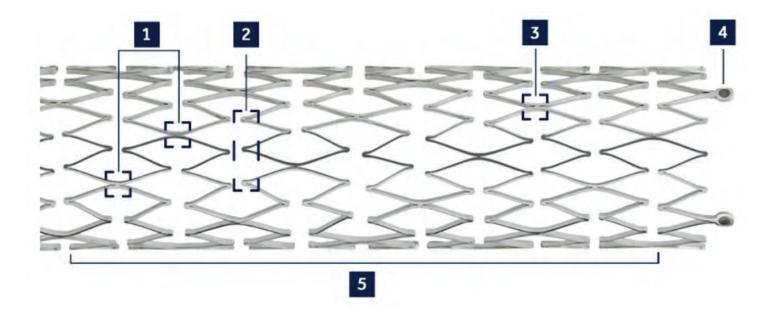
<sup>†</sup>Bench test data on file at Medtronic.

### **Entrust**<sup>™</sup> Delivery System

You asked for simple deployment with reduced variability — and the Entrust system delivered.

- 5 F low profile
- 0.035" guidewire compatibility
- Triaxial shaft design
- 150 cm catheter lengths





#### 5 F delivery system

Low profile may allow for:

- Smaller puncture site
- Less time applying pressure<sup>1</sup>
- Quicker ambulatory rates<sup>2</sup>
- Reduced vascular access complications<sup>3,4</sup>

#### Redesigned tip-

Tip attached to outer catheter eliminates risk of tip catching the stent upon removal of delivery system

#### Triaxial design -

Gold isolation sheath reduces friction from the system for increased accuracy and more predictable outcomes

#### 150 cm catheter length

Long catheter allows for an extended reach

#### 0.035 in guidewire compatible

Guidewire provides greater support for SFA procedures

#### **EverFlex**<sup>™</sup> Self-expanding Peripheral Stent with **Entrust**<sup>™</sup> Delivery System

Catheter			Stent dimensions		Size compatibility		
<b>80 cm</b> Product catalog	<b>120 cm</b> Product catalog	<b>150 cm</b> Product catalog	Unconstrained stent diameter (mm)	Unconstrained stent length (mm)	Sheath/guide compatibility (F)	Guidewire acceptance (in)	Recommended vessel size (mm)
EVD35-06-020-080	EVD35-06-020-120	EVD35-06-020-150	6	20	5	0.035	4.5-5.5
EVD35-06-040-080	EVD35-06-040-120	EVD35-06-040-150	6	40	5	0.035	4.5-5.5
EVD35-06-060-080	EVD35-06-060-120	EVD35-06-060-150	6	60	5	0.035	4.5-5.5
EVD35-06-080-080	EVD35-06-080-120	EVD35-06-080-150	6	80	5	0.035	4.5-5.5
EVD35-06-100-080	EVD35-06-100-120	EVD35-06-100-150	6	100	5	0.035	4.5-5.5
EVD35-06-120-080	EVD35-06-120-120	EVD35-06-120-150	6	120	5	0.035	4.5-5.5
EVD35-06-150-080	EVD35-06-150-120	EVD35-06-150-150	6	150	5	0.035	4.5-5.5
EVD35-07-020-080	EVD35-07-020-120	EVD35-07-020-150	7	20	5	0.035	5.5-6.5
EVD35-07-040-080	EVD35-07-040-120	EVD35-07-040-150	7	40	5	0.035	5.5-6.5
EVD35-07-060-080	EVD35-07-060-120	EVD35-07-060-150	7	60	5	0.035	5.5-6.5
EVD35-07-080-080	EVD35-07-080-120	EVD35-07-080-150	7	80	5	0.035	5.5-6.5
EVD35-07-100-080	EVD35-07-100-120	EVD35-07-100-150	7	100	5	0.035	5.5-6.5
EVD35-07-120-080	EVD35-07-120-120	EVD35-07-120-150	7	120	5	0.035	5.5-6.5
EVD35-07-150-080	EVD35-07-150-120	EVD35-07-150-150	7	150	5	0.035	5.5-6.5
EVD35-08-020-080	EVD35-08-020-120	EVD35-08-020-150	8	20	5	0.035	6.5-7.5
EVD35-08-040-080	EVD35-08-040-120	EVD35-08-040-150	8	40	5	0.035	6.5-7.5
EVD35-08-060-080	EVD35-08-060-120	EVD35-08-060-150	8	60	5	0.035	6.5-7.5
EVD35-08-080-080	EVD35-08-080-120	EVD35-08-080-150	8	80	5	0.035	6.5-7.5
EVD35-08-100-080	EVD35-08-100-120	EVD35-08-100-150	8	100	5	0.035	6.5-7.5
EVD35-08-120-080	EVD35-08-120-120	EVD35-08-120-150	8	120	5	0.035	6.5-7.5
EVD35-08-150-080	EVD35-08-150-120	EVD35-08-150-150	8	150	5	0.035	6.5-7.5

#### References

 $^*$ EverFlex $^*$  Self-expanding Peripheral Stent. U.S. only. DRG market share data for peripheral self-expanding bare metal stents.

#### Brief Statement

Indication: The EverFlex™ Self-Expanding Peripheral Stent with Entrust™ Delivery System is intended to improve luminal diameter in the treatment of symptomatic *de novo* or restenotic lesions up to 140 mm in length in the native Superficial Femoral Artery (SFA) and/or proximal popliteal arteries with reference vessel diameters ranging from 4.5–7.5 mm.

Contraindications: Use of the EverFlex\*\* Self-Expanding Peripheral Stent with Entrust\*\* Delivery System is contraindicated in patients with known hypersensitivity to nickel titanium; patients contraindicated for anticoagulant and/or antiplatelet therapy; patients who have a lesion that prevents complete inflation of an angioplasty balloon or proper placement of the stent or stent delivery system. The EverFlex\*\* Self-Expanding Peripheral Stent with Entrust\*\* Delivery System is contraindicated for use in the carotid artery.

Potential Adverse Events: Potential adverse events that may be associated with the use of a stent in the SFA and proximal popliteal arteries include, but are not limited to: Allergic reaction, Amputation, Arterial dissection/perforation, Bleeding disorders (including GI, lymphatic), Infection (local or systemic including bacteremia or septicemia), Pseudoaneurysm, Restenosis, Stent/Vessel Thrombosis, and Surgical or endovascular intervention.

See the Instructions for Use provided with the product for a complete list of warnings, precautions, adverse events, and device information.

**CAUTION**: Federal (USA) law restricts these devices to sale by or on the order of a physician.

#### medtronic.com/EverFlex



 $<sup>^1</sup>B\ddot{\text{u}}\text{chler JR, Ribeiro EE, Falcão JL, et al. A randomized trial of 5 versus 7 French guiding catheters for transferoral percutaneous coronary stent implantation. \textit{J Interv Cardiol.} February 2008;21(1):50-55 for transferoral percutaneous coronary stent implantation. \textit{J Interv Cardiol.} February 2008;21(1):50-55 for transferoral percutaneous coronary stent implantation. \textit{J Interv Cardiol.} February 2008;21(1):50-55 for transferoral percutaneous coronary stent implantation. \textit{J Interv Cardiol.} February 2008;21(1):50-55 for transferoral percutaneous coronary stent implantation. \textit{J Interv Cardiol.} February 2008;21(1):50-55 for transferoral percutaneous coronary stent implantation. \textit{J Interv Cardiol.} February 2008;21(1):50-55 for transferoral percutaneous coronary stent implantation. \textit{J Interv Cardiol.} February 2008;21(1):50-55 for transferoral percutaneous coronary stent implantation. \textit{J Interv Cardiol.} February 2008;21(1):50-55 for transferoral percutaneous coronary stent implantation. \textit{J Interv Cardiol.} February 2008;21(1):50-55 for transferoral percutaneous coronary stent implantation. \textit{J Interv Cardiol.} February 2008;21(1):50-55 for transferoral percutaneous coronary stent implantation. \textit{J Interv Cardiol.} February 2008;21(1):50-55 for transferoral percutaneous coronary stent implantation. \textit{J Interv Cardiol.} February 2008;21(1):50-55 for transferoral percutaneous coronary stent implantation. \textit{J Interv Cardiol.} February 2008;21(1):50-55 for transferoral percutaneous coronary stent implantation. \textit{J Interv Cardiol.} February 2008;21(1):50-55 for transferoral percutaneous coronary stent implantation. \textit{J Interv Cardiol.} February 2008;21(1):50-55 for transferoral percutaneous coronary stent implantation. \textit{J Interv Cardiol.} February 2008;21(1):50-55 for transferoral percutaneous coronary stent implantation. \textit{J Interv Cardiol.} February 2008;21(1):50-55 for transferoral percutaneous coronary stent implantation. \textit{J Interv Cardiol.} February 2008;21(1):50-55 for transferoral percutane$ 

 $<sup>^2\,</sup>Rodriguez\,A,\,Katz\,S.\,The\,use\,of\,the\,StarClose\,device\,for\,obtaining\,femoral\,artery\,hemostasis.\,\textit{Vasc}\,Endovascular\,Surg.\,October\,2011;45(7)627-630.$ 

<sup>&</sup>lt;sup>3</sup> Meis A, Osada N, Schlegel PM, Fischbach R, Heindel W, Kloska SP. Sonographic follow-up of the access site after arterial angiography: Impact on the detected complication rate. J Ultrasound Med. September 2009;28(9):1151-1157.

<sup>&</sup>lt;sup>4</sup> Zahn R, Thoma S, Fromm E, et al. Do 5-F Catheters reduce the incidence of a pseudoaneurysm? Int Angiol. September 1996;15(5):257-260.